

RURAL HEALTH CONNECT

Improving the Health of Rural Communities

IN THIS ISSUE:

- COVID-19
- What's New
 - NHSC Site Application
 - UDOH CHW Training
 - 3RNET Annual Report
 - NRHA Securing PPE
 - COVID-19 Uninsured Program Portal
 - U.S. Census Report
- Upcoming Events
- OPCRH Program Updates
 - Health Systems Support
 - Workforce Development
- Statewide Announcements
 - Utah Leads Together 3.0 Plan
 - Executive Order Guidelines for Low-Risk Phase
 - Utah Transitions Select Counties to Yellow-Risk
 - Utah Uninsured COVID-19 Testing Assistance
 - A Mask for Every Utahn
 - Medical Cannabis Recommendation Letter
 - WIC eligibility
- Webinar Opportunities
 - Project ECHO: Medical Economics
 - ECHO: Diabetes in the time of COVID-19
 - Latino Behavioral Health
 - Today with Macrae
 - Dissemination of Rural Health
 - Suicide Prevention Toolkit
 - Utah Cannabis Program
- Funding Opportunities
 - HRSA Scholarship
- Announcements/Reports from:
 - RHHub
 - HRSA
 - 3RNet



We want to understand how the COVID-19 pandemic is affecting health facilities throughout rural Utah. Are you seeing an increase in service utilization? A decrease? Have you had to lay-off staff? Are support staff working from home? How have you been able to utilize telehealth services? Please send responses to opcrh@utah.gov.

We look forward to hearing from you!

Reduce Your Risk of Coronavirus



What's New

NHSC Site Application is OPEN

The 2020 [National Health Service Corps \(NHSC\) New Site Application](#) is now open through Tuesday, July 21 at 11:59 p.m. ET. As an NHSC-approved site, your providers may apply for one of the [loan repayment programs](#) and you can take advantage of helpful recruitment tools like the [Health Workforce Connector](#) and [Virtual Job Fairs](#). [Learn more](#) and [start your application today](#).

Eligible sites include health care facilities that provide outpatient, ambulatory and primary health care services (medical, dental, and behavioral and/or substance abuse treatment) to populations residing in high-need urban and rural areas. Critical Access Hospitals (CAHs) are the only eligible inpatient facilities and must be affiliated with an NHSC-approved outpatient clinic.

Basic eligibility requirements:

- Located in and serving a federally-designated Health Professional Shortage Area (HPSA)
- A primary care outpatient facility (medical, dental, or behavioral)
- Utilizes and prominently advertises a qualified discounted/sliding fee schedule for individuals at or below 200% of the federal poverty level
- Does not deny services based on inability to pay or enrollment in Medicare, Medicaid, and Children's Health Insurance Program (CHIP)
- Ensures access to ancillary, inpatient, and specialty care
- Credentialing process includes query of National Practitioner Data Bank
- Meets all requirements listed in the NHSC Site Agreement

For a complete list of eligible sites and requirements, visit the [NHSC website](#) and review the [2020 NHSC Site Reference Guide](#)

Utah Department of Health Community Health Workers Core Skills Training

Would you like to gain or sharpen your foundational skills to be an effective Community Health Worker? Are you passionate about your community and want to work with them to empower and support their wellbeing? The CHW Core Skills training may be for you! Complete the application [HERE](#).

** Please note this is a unique cohort due to COVID-19, which will be expected to move through quicker than usual and have a basic/good grasp on online learning.

Questions? Please contact tacker@utah.gov.

Applications due **Wednesday, June 3rd at 3:00 PM** and starts **June 15th**

3RNET Annual Report

[3RNet](#) is a resource that links physicians, mid-level providers, and allied health professionals with facilities recruiting for these positions. The Utah Center for Rural Health administers the 3RNet Program on behalf of the Office of Primary Care and Rural Health.

If you are a healthcare provider, resident, or student looking for a practice opportunity in Utah, visit [3RNet](#) to see a list of current openings. If you are a healthcare facility or community wanting to recruit a physician, mid-level, or allied health provider, visit [3RNet](#) and post your current openings.

3RNet is also a valued resource for information on Health Professions Shortage Areas, Loan Repayment, and the J-1 Visa Waiver Program.

You can learn more about 3Rnet through its Annual Report or by contacting Rita Osborn (osborn@suu.edu) or Carrie Torgerson (torgersen@suu.edu)

To view the Annual Report, please follow the link [here](#).

NRHA: Three ways rural hospitals can secure PPE amid the nationwide shortage

Working with limited essential supplies is not new for rural hospitals. A report from HHS' Office of Inspector General noted that rural hospitals face "special challenges" maintaining normal supplies and restocking quickly when they run out. But as personal protective equipment (PPE) and other needed supplies become increasingly scarce in the United States and abroad, rural hospitals must get creative to find and secure the items they need to care for patients.

[How are hospitals handling a PPE shortage?](#)

The need for rural hospitals is even more pressing now as experts warn that notoriously under-resourced rural communities could be the United States' next Covid-19 hot spot. Rural hospitals, already struggling financially, know the risk their organizations face if their communities suffer an outbreak. If more rural hospitals are forced to shut down, it could exacerbate health disparities between rural and urban areas.

[To view the article, please follow the link here.](#)

COVID-19 Uninsured Program Portal

The U.S. Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA), launched a new COVID-19 Uninsured Program Portal, allowing health care providers who have conducted COVID-19 testing or provided treatment for uninsured COVID-19 individuals on or after February 4, 2020 to submit claims for reimbursement.

Providers can access the portal at COVIDUninsuredClaim.HRSA.gov.

United States 2020 Census

If you have not yet responded, you are strongly encouraged to do so promptly. You can respond online at 2020census.gov — without ever having to leave home or meet with a census taker.

Your participation in the 2020 Census is mandated by the Constitution, even if you recently completed another survey from the U.S. Census Bureau. And while you are required by law to participate, the Census Bureau is required by law to protect your answers. Your responses are used only to produce statistics, and the Census Bureau [does not disclose any personal information](#).

If you have already responded to the 2020 Census, thank you! Now we need your help to fulfill our constitutional duty to count everyone across the U.S. and its five territories. Using social media, you can easily inform others of the importance of the census and encourage them to respond.

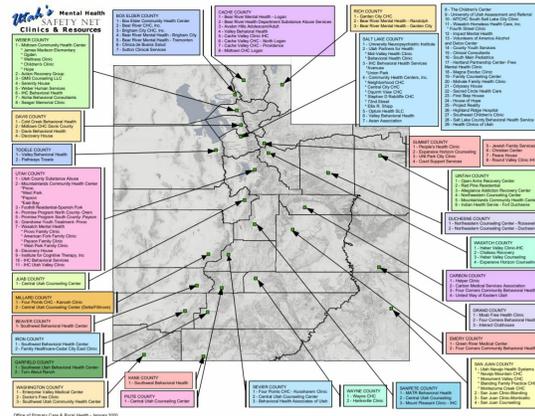
I challenge you
— TO COMPLETE —
the census to shape
the future of
hospitals

Responses to the 2020 Census will shape how hundreds of billions of dollars in federal funding are distributed to local communities annually.

#shapeyourfuture

OPCRH Office Highlight:

Each month the OPCRH team highlights a significant event or project in our office. This month, we're highlighting our [Mental Health Safety Net Map](#) for the state of Utah! The Mental Health Safety Net Map is a newly developed map, if you have any suggestions or edits, please forward them to coltongordon@utah.gov.



Upcoming Events

All upcoming events have been canceled or postponed.

OPCRH Program Updates

HEALTH SYSTEMS SUPPORT

- ***CANCELLED*** 2020 FLEX Summit on *June 11-12, 2020*. In consultation with the Planning Committee, we made the difficult decision to cancel this year's event. We believe this decision is consistent with the guidance around Utah's current risk level and respects the ongoing attention and focus on the COVID-19 response among the planned participants. We will be in touch again as we begin planning next year's Summit.

WORKFORCE DEVELOPMENT

- The OPCRH team would like to thank the agencies who applied for the **State Primary Care Grant Program** for the upcoming year. We plan to announce **awards by the end of June 2020**.
- The OPCRH is establishing a **Health Workforce Coalition** to develop a coordinated approach to addressing health workforce issues in rural and underserved Utah. The coalition will focus on the root causes of health workforce shortages, identify emerging issues affecting Utah's health workforce, and share successful models and opportunities to scale them. Members may include government, health industry, education institutions, and associated organizations. The first meeting, initially scheduled for March 26, was postponed due to COVID-19. We are restarting our outreach to potentially interested stakeholders. If you would like to participate or learn more about this initiative, please contact **Ashley Moretz**, OPCRH Director, at amoretz@utah.gov

Statewide Announcements

State Leaders Release Utah Leads Together 3.0

May 27, 2020

Building on previous versions of Utah's economic recovery plan, Utah leaders released version three of the Utah Leads Together plan. Gov. Gary Herbert, along with Bryon Russell, co-chair of the Utah Multicultural Commission, and Natalie Gochnour, director of the Kem C. Gardner Policy Institute, University of Utah, announced the release Wednesday. Utah Leads Together 3.0 presents guidelines and instructions for protecting high-risk individuals and addresses impacts to

Utah's multi-cultural communities. These discussions will be beneficial as businesses continue to open in Utah.

“From the earliest days of the COVID-19 crisis in our state, Utah Leads Together has offered a roadmap to help overcome the ravages of this virus,” Gov. Herbert says in his introductory message. “Utah Leads Together has helped to unite Utahns in following vital public health guidelines and staying engaged with the economy, all while assisting those in greatest need.”

In addressing high-risk populations, Utah Leads Together 3.0 re-affirms the guidance of the Utah Department of Health to those who fall into high-risk categories. Those guidelines are:

- Wear face masks at all times in public settings
- Stay home as much as possible. If you must go into public settings stay at least 6 feet from others.
- Wash hands often
- Limit travel to only essential travel. If telework is not possible, limit travel to work-related travel only.
- Continue to seek emergency care, routine doctor visits, and medication pickups
- Limit visiting friends or family without urgent need
- Limit physical interactions with other high-risk individuals, except for members of your household or residence
- Limit attending gatherings of any number of people outside your household or residence
- Do not visit others in hospitals, nursing homes, or other residential care facilities

Additional guidance for high-risk individuals can be found [here](#).

Addressing multi-cultural communities, Utah Leads Together 3.0 outlines steps to ensure those communities are getting the help they need.

Those steps include (among others):

- Increase language accessible information – Through translation, interpretation, and literacy skills considerations.
- Assist in the coordination of disseminating information – Through non-traditional channels for mass access.
- Increase service engagement in underserved communities – To address essential needs (food and social services).
- Increase efforts for economic sustainability among diverse businesses

To read the full Utah Leads Together 3.0 document, click [here](#)

Governor Issues Executive Order Releasing Updated Guidelines for Low-Risk Phase in the Utah Leads Together Plan

May 27, 2020

Governor Gary R. Herbert has issued an Executive Order updating guidelines for areas in low health risk designation under Utah's phased health guidance plan.

The order specifically addresses updated guidelines pertaining to social gatherings, education, businesses, travel and events.

“We are making progress and we can see that these recommendations are working,” Gov. Herbert said. “I would like to express my gratitude to all who are taking these recommendations seriously, and stress that following these guidelines is crucial to ensuring the safety and health of us all.”

The new order clarifies that generally all businesses that are within the counties that have been moved to the low risk phase are operating if they can meet and adhere to the specific guidelines. For clarity, the order states symptom checking in public and business interactions should happen when feasible.

Travel guidelines request that all continue to avoid non-essential travel to areas with widespread community transmission of COVID-19.

The guidance for K-12 education addresses the resumption of school activities, including sports, under jurisdiction of district and school authorities in adherence to indoor and outdoor guidelines. Additionally, hand sanitizer will need to be made available to faculty and students in each classroom and regular hand washing routines will be instituted. Faculty and staff will need to wear face coverings when social distancing is not possible. Updates regarding face coverings for students will be provided by local school and charter boards in consultation with health department officials.

Regarding higher education, campuses may be open for in-person classes with increased cleaning and hygiene regimen. In cooperation with the Utah System of Higher Education, each institution will develop individualized plans for repopulating campus, monitoring for incidence, containing outbreaks, and reclosing if necessary.

More updated information regarding higher education, outdoor recreation, including pools and waterparks can be found in the guidelines attached.

The order is effective immediately and remains in effect until 11:59 p.m. on June 5. View the full order [here](#).

View the updated phased guidelines [here](#).

Governor Herbert Issues Executive Order Transitioning Grand County, West Valley City and Magna to Yellow Health Risk Status

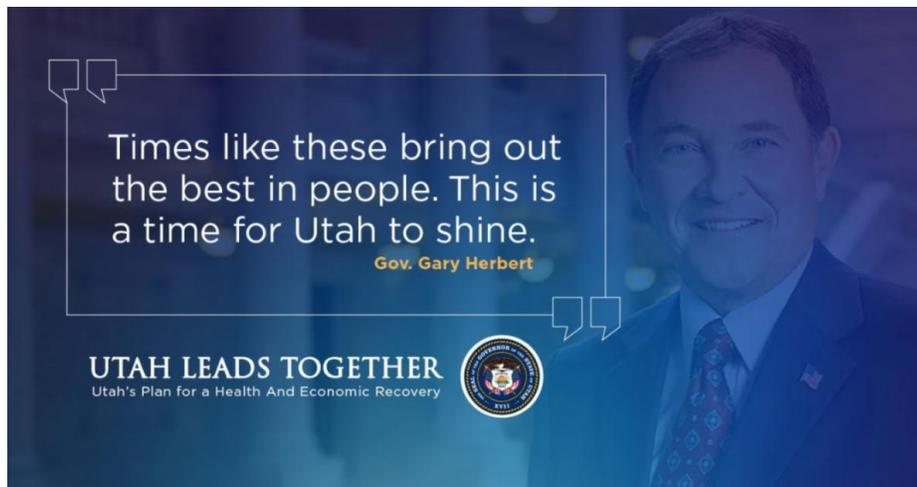
May 29, 2020

In consultation with the Utah Department of Health and the Local Health Departments, Gov. Gary R. Herbert has issued an Executive Order moving Grand County, West Valley City, and Magna to **Low Health Risk Status**, or **Yellow**.

Per the Order, Salt Lake City, Bluff, and Mexican Hat will remain at Moderate Health Risk, or Orange.

The order is effective immediately.

View the full Executive Order [here](#).



Uninsured COVID-19 Testing Assistance

If you are uninsured and meet residency/citizenship guidelines, you may be eligible to receive coverage for COVID-19 testing and other related services. This coverage can also help pay for any COVID-19 testing you may have already received. The Utah Department of Health and other medical providers will provide you more information on this coverage and determine if you qualify. Click [here](#) to apply for the COVID-19 Uninsured Testing Coverage.

A Mask for Every Utahn

Governor Herbert announced 'A Mask for Every Utahn,' a public-private partnership to provide a free face mask to Utahns who don't have one. Masks, along with social distancing, will play an important role as more people return to work and everyday activities, and we all work to reactivate Utah's economy.

The state of Utah, through an arrangement with the Utah Manufacturers Association and Cotopaxi, purchased two million face masks to help protect the health of Utahns during the global COVID-19 pandemic. The state's order for masks helped employ more than 200 Utahns by keeping local manufacturers open. The federal CARES Act provided funding for the masks.

"We want to do everything we can as we work together as a state to combat COVID-19," said Gov. Herbert. "Wearing a mask when we are out in public may not be convenient, but it can help slow the spread of the virus. Let's all do our part in stopping the spread and helping to protect those around us."

[For more information, please follow the link here.](#)

Patients May Now Get Medical Cannabis with Recommendation Letters

The Utah Department of Health (UDOH) announced changes to the Utah Medical Cannabis Program which will allow more patients access

to medical cannabis. Under House Bill 425, passed during the 2020 Utah Legislative Session, qualifying patients who do not have a medical cannabis card but have a “recommendation letter” from their medical provider may purchase medical cannabis until December 31, 2020. Prior to this legislation, patients could only purchase medical cannabis with a medical cannabis card.

To qualify to purchase medical cannabis with a recommendation letter, individuals must meet the following requirements:

1. Live in Utah.
2. Present a recommendation letter to the medical cannabis pharmacy from a licensed medical professional that states you have been diagnosed with a qualifying condition. Approved licensed medical professions in Utah include a medical doctor, osteopathic physician, advanced practice registered nurse, or physician assistant.
3. The medical cannabis pharmacy must receive independent confirmation from the individual's medical provider that the recommendation letter is valid.
4. Present a valid form of photo identification to the medical cannabis pharmacy such as a drivers license, a United States passport or passport card, or a United States military identification card.

WIC Assistance is Available to All Who Meet Income Eligibility

Many immigrants in Utah are questioning how recent changes to the public charge rule will affect their families. WIC, the supplemental nutrition program for women, infants and children, is NOT included in the final public charge rule. Pregnant women, newborns, and children up to the age of 5 may fully participate in the WIC program regardless of immigration or citizenship status.

For more than four decades, WIC has provided early and targeted nutrition for women and children. WIC compliments efforts by SNAP and Medicaid to ensure healthy pregnancies, positive birth outcomes and early child development. When families lose access to these programs, children lose access to preventative health measures that can mitigate significant health conditions or poor health later in life. WIC provides eligible participants with nutrition support and resources that improve health outcomes.

People currently on WIC should continue participation. People who were on WIC in the past can reapply. People who have not previously received WIC benefits can sign up without fear of negative consequence. The final rule clarifies that WIC participation will not be considered in a public charge determination conducted in the United States, even though other vital programs such as SNAP and Medicaid are affected. The final rule does not permit public charge consideration of Medicaid benefits if the immigrant is younger than 21 years of age, or a pregnant woman (including a postpartum period of 60 days). WIC clinics and agencies do not inquire or collect information about a participant’s immigration or citizenship status. In compliance with

federal regulations, they do not share any personal information with outside agencies, including immigration authorities. Refugees, asylees, and VAWA (Violence Against Women Act) self-petitioners are protected and not subject to public charge determinations. Utah WIC welcomes all community members and their families. Everyone in Utah may use WIC services regardless of immigration status and without fear of it being held against you.

For more information visit the National WIC Association website or call 1-877-WIC-KIDS to speak to someone locally.

Webinars

Project ECHO: Medical Economics



University of Utah Project ECHO

Join Rich McKeown and David Lee as they present on the much anticipated topic of Medical Economics. Rich McKeown is the Chairman of the Leavitt Partners Board of Directors. He co-founded Leavitt Partners and served as the firm's first CEO from 2009 – 2017. Rich co-authored with Mike Leavitt the highly-acclaimed book titled Finding Allies, Building Alliances. David Lee is a Director based in Washington, DC. David provides policy counsel and analysis to clients on issues related to regulations, legislation, and business implications. His work is focused on issues related to government payers, including Medicare and Medicaid, health care reform, and other provider issues. Q&A to follow.

This is meant to serve as a resource for our rural providers, as well as our affiliate partners.

For questions email:
Sarah Day sarah.day@hsc.utah.edu

To join the COVID19 Zoom Meeting
[CLICK HERE](#)
Zoom Meeting ID: 780-365-174

Starting June 1, 2020 and held weekly
on Mondays from Noon - 1:00 PM

ECHO Diabetes in the time of COVID-19

The goal of the Diabetes in the Time of COVID-19 ECHO is to empower primary care providers to address the needs of patients with type 1 and type 2 diabetes in their communities who do not have access to routine specialty care. Preliminary data on outcomes for those with diabetes and COVID-19 indicate higher hospitalization, intensive care, and fatality rates compared with those without reported underlying health conditions. Minimizing hyperglycemia and “poor control” is paramount to reducing diabetes patient risk and vulnerability to infection and complications, including COVID-19.



Now, more than ever, it is important for care teams in the primary care setting to support patients with diabetes obtain achievable goals for their blood glucose, blood pressure, and beyond. Our ECHO program will support you in managing patients with diabetes during and after the COVID-19 pandemic.

Program Overview

This is a series of 16 free, CME (Continuing Medical Education) accredited webinars. You are invited to join us weekly or drop in on any of our sessions.

Our renowned multidisciplinary diabetes faculty from Stanford and more than 10 organizations across the US will address the urgent needs of patients with type 1 and type 2 diabetes who require complex management in the primary care setting.

For more information, please follow the link [here](#).

Starting May 20, 2020 and held weekly on Wednesdays from 9 A.M. - 10:15 A.M. PT

NEXT WEBINAR: JUNE 3, 2020

Latino Behavioral Health

Latino Behavioral Health is hosting Free Online Support Groups in Spanish

Please review the available options carefully before making your



selection. If you want to register in more than one group, select all the options you want.

If you wish to register for multiple groups, please select all the options that apply:

Family Support Group: For family members with a loved one with a mental health illness.

United in Recovery/Connections: Support group for people with a mental health condition.

Women's Heart: Closed support group for women with a mental health illness.

LGBTQ + Latinx youth (18-30): Support group for Latinx youth who identify themselves as members of the LGBTQ + community with a mental health condition.

Recovering Peers: Support group for people in recovery from substance abuse and alcoholism.
To register, please follow the link [here](#).

HRSA Health Center Program Updates

Thursday, June 4
2:00-3:00 p.m. ET

Join the webinar the day of the session*
Call-in: 888-390-1271
Passcode: 1040434

*NOTE: This link will be accessible only to the first 1,500 participants. If you cannot log in for the visual portion, please still call in!

[Register Here](#)

Free Rural Health COVID-19 "Call First" Communications Toolkit

As rural health leaders, you've been working diligently on communications regarding important issues such as social distancing, hand washing and overall messaging around practices to flatten the curve. An additional concern is taking all steps possible to not overburden our rural health



facilities, while demonstrating leadership in our communities to promote a sense of vigilance, but also an environment of security and calmness.

In this spirit, NRHA through donated services of partner Legato Healthcare Marketing, is providing NRHA members free access to a communications toolkit with messaging focused on:

- Calling first to determine if you should be seen
- The leadership role your hospital/clinic is taking to protect your community

Toolkit components – designed to allow customization and branding for your facility -- include items such as print and digital ads, radio scripts, social media posts and media materials. Legato is donating its services not only for the production and use of these materials, based on Centers for Disease Control and Prevention (CDC) messaging and input from a rural health taskforce, but also for complimentary assistance in helping to download materials. [Visit here](#). When entering this site, you will be asked to provide your email so that updates to the toolkit can be sent to you immediately, allowing you to respond promptly to this ever-changing situation.

[To register, please follow the link here.](#)

COVID-19 Toolkit for Rural Facilities

As leaders in rural healthcare, we recognize how critical it is for you to protect your care teams and the patients in your community amid the COVID-19 crisis.

In response, CPSI, through our family of companies is pleased to share that we are offering, **free of charge**, a set of tools to assist all rural hospitals and community providers with [COVID-19 readiness](#) along with a comprehensive telehealth solution that goes beyond COVID-19. That offering is expected to be available by the end of April 2020.

For more information on how your healthcare facility can take advantage of these telehealth tools, email us



[To access the toolkit, please follow the link here.](#)

Dissemination of Rural Health Research: A Toolkit

The emphasis of knowledge translation is to ensure health providers, consumers, researchers, advocates, and policymakers are aware of, can access, and are able to use health research findings to inform decision-making. Differences among audiences make it imperative to know when and how to utilize various modes of dissemination for health research.

This toolkit aims to assist researchers with step four in the knowledge translation process, reaching their target audiences. By developing appropriate, timely, accessible, and applicable products, researchers have the opportunity to inform step five, a change in policy or practice. This toolkit provides descriptions for multiple modes of dissemination and includes discussions of the purpose of each product, which product is appropriate given the topic and audience, and how to develop each. Effective examples are also provided.

[To access the toolkit, please follow the link here.](#)

Rural Suicide Prevention Toolkit

The Rural Suicide Prevention Toolkit compiles evidence-based and promising models and resources to support organizations implementing suicide prevention programs in rural communities across the United States. The modules in the toolkit contain resources and information focused on developing, implementing, evaluating, and sustaining rural suicide prevention programs. There are more resources on general community health strategies available in the [Rural Community Health Toolkit](#).



[To access the toolkit, please follow the link here.](#)

Utah Medical Cannabis Program 4-Hr Required Course



This course introduces the endocannabinoid system and its interaction with the components of the cannabis plant. It also addresses administration, therapeutic use, drug metabolism, physiologic and cognitive effects, potential risks, and drug interactions.

The use of marijuana in obstetric patients, pediatric patients, adolescent patients, and elderly patients is discussed in detail. In addition, the health effects of marijuana and cannabinoids in epilepsy are reviewed. Important considerations for patients with ischemic heart disease, hepatic disease, psychotic illness, and those with a history of drug dependence are provided.

This course also informs the reader about the legal and medical considerations in the recommendation of medical marijuana, and addresses the parts of H.B. 3001, including the Utah Medical Cannabis Act, that would be of interest to a Utah healthcare provider.

For more information about the course, please follow the link [here](#).

Funding Opportunities

Please check our website for updated funding opportunities. You can find the table by following the link [here](#).

National Organizations

[Human Services to Support Rural Health](#)

[Oral Health in Rural Communities](#)



Find Us

3760 South Highland Drive
Suite 361C
SLC, UT 84106

Call Us

Office: 801-273-6677
Fax: 801-273-6512

Email Us

opcrh@utah.gov



The OPCRH provides support to our stakeholders and clients in the form of hands-on support, economic impact analysis, research, community health needs assessments, and healthcare workforce needs assessment. We also provide technical assistance and pertinent information on student loan repayment programs and grant opportunities

If you would like to be a part of our newsletter in the future and/or would like to submit a success story, announcement, or communicate any other information to us or your rural health partners, please contact Colton Gordon Program Specialist 801-230-6570, coltongordon@utah.gov

Subscribe to this
Newsletter